

March 25, 2019

Mariene H. Dortch, Secretary Federal Communications Commission 445 12<sup>th</sup> Street, S.W. Washington, D.C. 20554

RE: Correct Solutions, LLC
FCC Form 2301(a) and 2301(b)- Inmate Calling Services Annual ReportCONFIDENTIAL
For the year ending December 31, 2018

Dear Ms. Dortch,

Enclosed please find the FCC Form 2301(a) and 2301(b) – Inmate Calling Services Annual Report – CONFIDENTIAL for the year ending December 31, 2018, filed on behalf of Correct Solutions, LLC.

The FCC Form 2301(a) form was filed as Redacted Confidential. The pages were marked as "REDACTED-FOR PUBLIC INSPECTION".

I have also enclosed an extra copy of this letter to be date stamped and returned to me in the enclosed, self-addressed, postage prepaid envelope.

Please contact me should you have any questions about this submission at 407-260-1011 or mark@csilongwood.com.

Respectfully submitted,

Mark Lammert
Attorney-in-Fact
Correct Solutions, LLC

## In the Matter of Interstate Inmate Calling Services WC Docket No. 12-375 Annual Reporting Form

FCC Form 2301(a) OMB Control No. 3060-1222

Instructions: Please read this form carefully before completing. This form is to be completed by an officer of each provider of inmate calling services (ICS). If the provider seeks confidential treatment of any information, consistent with our rules and the Protective Order in place in this proceeding, it should identify the specific information which it claims is subject to confidential treatment.

## I. Basic Information

1. Provider Name:	2. Reporting Period:				
orrect Solutions, LLC 2018					
3. Officer Name, Title:					
Ryan Horvath, Managing Member					
. Officer Telephone Number: 5. Officer E-Mail Address:					
18-232-1525 ryan@lasallecorrections.com					
6. Total Number of Correctional Facilities Served by Provider: REDACTED					
7. Number of Prisons Served by Provider:					
REDACTED					
8. Number of Jails Served by Provider with Average Daily Population (ADP) of 0-350: REDACTED					
KEDACIED					
9. Number of Jails Served by Provider with ADP of 350-999:					
REDACTED					
10. Number of Jails Served by Provider with ADP of 1000 or more:					
REDACTED					

## II. ICS Rates

Facility Name	Facility Type	ADP (for jails)	Intrastate Rate	Intrastate Rates Different from Listed Rate	Interstate Rate	Interstate Rates Different from Listed Rate	International Rate
REDACTED - FOR PUBLIC INSPECTION							
,							

II(a).
Narrative
Description
of ICS Ra
ates

# **REDACTED - FOR PUBLIC INSPECTION**

2 In this space, please list all per-minute interstate rates that are different from the provider's average Interstate Rate (see Section II, Column 6):

# **REDACTED - FOR PUBLIC INSPECTION**

## III. Ancillary Service Charges

Facility Name	Facility Type	ADP (for jails)	List of Ancillary Service Fees (types)	Charge for Each Ancillary Service	Number of Times Fee has been Charged
REDACTED - FOR PUBLIC INSPECTION	<del></del>		-1-94		
					7-16-1-16-1-16-1-16-1-16-1-16-1-16-1-16
<u> </u>					
	-				
				_	

## IV. Variable Site Commission Payments

			REDACTED - FOR PUBLIC INSPECTION
Monthly Amount of Variable Site Commission Payments	ADP (for jails)	Facility Type	Facility Name

## V. Fixed Site Commission Payments

Contracting Party	Contract Identifier	Fixed Site Commissions Required by Contract	Facilities Covered by Contract	Facility Type	ADP (for jails)
REDACTED - FOR PUBLIC INSPECTION	-				
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				7	

## VI. Video Calling Services

Facility Name	Facility Type	ADP (for jails)	Total Video Calling Minutes of Use	Per-Minute Rate for Video Calling	List of Ancillary Service Fees (types)	Charge for Each Ancillary Service	Number of Times Fee has been Charged			
REDACTED - FOR PUBLIC INSPECTION										
***************************************										
							-			

## VII. Disability Access

Facility Name	Facility Type	ADP (for jails)	Number of Disability-Related Calls	Number of Problems Experienced with Disability-Related Calls	List of Ancillary Service Fees (types)	Charge for Each Ancillary Service	Number of Times Fee has been Charged
REDACTED - FOR PUBLIC INSPECTION							
				-	-		

### FCC NOTICE REQUIRED BY THE PAPERWORK REDUCTION ACT

We have estimated that each response to this collection of information will take 60 hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain the required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERM, Paperwork Reduction Project (3060-1222), Washington, DC 20554. We will also accept your comments via the Internet if your send them to <a href="mailto:pra@fcc.gov">pra@fcc.gov</a>. Please DO NOT SEND COMPLETED APPLICATIONS TO THIS ADDRESS. Remember - you are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1222.

THE FOREGOING NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, P.L. 104-13, OCTOBER 1, 1995, 44 U.S.C. 3507

FCC Form 2301(b)	Estimated Time Per Response: 5 Hours				
Inmate Calling Services	Annual Certification Form				
-					
Please Read Instructions Before Completing	(To Be Completed by Service Provider)				
1. Name of Service Provider	2. Reporting Year				
Correct Solutions, LLC	2018				
3. Officer Name, Title					
Ryan Horvath 4. Mailing Address of Officer					
Street Address					
182 Bastille Lane					
City	State Zip Code				
Ruston	LA 71270				
5. Telephone Number					
318-232-1525 6. Email Address					
ryan@lasallecorrections	s com				
Block 2: Certification					
	ial officer (CFO), or other senior executive with				
first-hand knowledge of the accuracy and comp	leteness of the information provided must certify				
as follows:	•				
Y under man-less of medium, that					
I swear under penalty of perjury that:	(name and title) are an afficulation of the chara				
(i) I Ryan Horvath (name and title), am an officer of the above-					
named service provider and am authorized to submit the attached Annual Reports on behalf of the service provider;					
(ii) I have examined the attached Annual Reporting Forms and all requested information					
has been provided;					
(iii) Based on information known to me, or provided to me by employees responsible for					
the data being submitted, all statements of fact, as well as all data, are true and					
accurate; and					
(iv) The above-named service provider is					
Communications Commission's rules governing inmate calling services (ICS). I					
or criminal prosecution.	with the rules governing ICS may result in civil				
9. Signature of Authorized Person	10. Date , .				
2. Signature of Authorized 1 cross	03/28/2019				
11. Printed name of Authorized Person					
Ryan Horvath					